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**PETERSFIELD URBAN DISTRICT COUNCIL**



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# **ANNUAL REPORT**

OF THE

**MEDICAL OFFICER OF HEALTH**

AND

**SANITARY INSPECTOR**

for the year

**1950**

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PETERSFIELD

THWAITES & WATTS, LAVANT STREET



PETERSFIELD URBAN DISTRICT COUNCIL

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ANNUAL REPORT  
OF THE  
Medical Officer of Health  
AND  
Sanitary Inspector  
FOR THE YEAR  
1950

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## CONTENTS.

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	Pages.
I. MEMBERS OF COUNCIL AND HEALTH COMMITTEE AND PUBLIC HEALTH OFFICERS ...	1
II. SUMMARY OF MAIN FEATURES ...	2
III. STATISTICS AND SOCIAL CONDITIONS OF THE AREA ...	3
IV. VITAL STATISTICS ...	4-7
V. GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA ...	8-10
VI. SCHOOL HEALTH SERVICES ...	10-11
VII. HOSPITALS ...	12
VIII. HOUSING ...	13
IX. INSPECTION AND SUPERVISION OF FOOD ...	13-15
X. INFECTIOUS DISEASE ...	16-21
XI. SANITARY INSPECTOR'S REPORT ...	22-31

# THE URBAN DISTRICT COUNCIL OF PETERSFIELD.

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*Chairman of the Council :*  
(1950-51)

\* MR. K. GAMMON.

*Vice-Chairman :*

ADMIRAL SIR STUART BONHAM-CARTER.

*Members of the Council :*  
(1950-51)

* MR. R. GOSLING.	MR. W. H. LeGOUBIN.
* MRS. A. A. HAYES.	MR. F. G. ROGERS (decd. Nov. 1950).
MR. H. C. JACOBS.	MR. M. R. URQUHART.
* MR. F. M. HOUNSOME.	MR. J. G. VINCE.
MR. E. J. KNELLER.	MR. A. C. GOULDER (from Nov. 1950).

*Chairman of the Health Committee :*

MR. D. K. CLARKE.

\* Other Members of the Health Committee.

## Public Health Officers :

*Medical Officer of Health :*

S. CHALMERS PARRY, M.A. Cantab., M.R.C.S., L.R.C.P., D.P.H.

*Sanitary Inspector and Meat and Food Inspector :*

F. G. BRADLEY, M.S.I.A. M.R.San.I.

*Clerk (Part-time) :*

MISS T. SMYTHE.

# PETERSFIELD URBAN DISTRICT COUNCIL.

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TOWN HALL,  
PETERSFIELD.

*October, 1951.*

*To the Chairman and Members  
of the Petersfield Urban District Council.*

I have the honour to present the Annual Report for the year 1950 on the health and sanitary circumstances of the Urban District of Petersfield.

It is satisfactory to report there have been no deaths from infectious diseases. During the year, the health of the district has been satisfactory and there has been no epidemic of infectious disease.

No case of diphtheria was notified during the year.

Parents are reminded that children should be immunised in infancy and should receive their first supplementary injection preferably just before going to school.

The general arrangement of this Report has been retained in order that it should serve also as a guide to the health services available for the district.

I am grateful to Mr. Bradley not only for his valuable co-operation and assistance in compiling this Report, but also for his help in the administration of the Health Department.

*J. Chalmero Parry.*

Medical Officer of Health,  
Petersfield Urban District Council.

## LEGISLATION.

During the year 1950, very little new legislation of Public Health significance was enacted. The principal changes were :—

- (1) The Shops Act (1950), which consolidated into one Act, various previous acts for 1912–1938.
- (2) Food and Drugs (Milk, Dairies and Artificial Cream) Act 1950, which consolidates the law relating to milk, dairies and artificial cream.
- (3) Diseases of Animals Act (1950) consolidated the law relating to the diseases of animals.
- (4) Bye-laws relating to the Handling, Wrapping and Delivery of Food were made by this Council under the Food and Drugs Act 1938. These bye-laws contain important provisions relating to general cleanliness in the handling of food.
- (5) Public Health Aircraft Regulations 1950, provides for the application of sanitary control of airborne traffic between England and places outside the “ Excepted Area ” as defined in the regulation.

## STATISTICS OF THE AREA.

Area	...	...	...	2,931 acres.
Rateable Value (31/3/51)	...	...	...	£60,106.
Sum represented by a penny rate (31/3/51)				£242.
Population	...	...	...	6,920.
Number of inhabited houses and flats	...	...	...	2,080.

## NATURAL AND SOCIAL CONDITIONS OF THE AREA.

The district is situated in Eastern Hampshire bordering on West Sussex.

The predominant geographical features are the South Downs, which lie to the south, and the Stoner Hill district which lies to the west.

Petersfield is a Market Town and shopping centre for the surrounding districts.

The district is mainly residential, but there are a few light industries—the principal one being a rubber works.

The open space, known as the Heath, includes a boating lake, cricket ground, tennis courts and golf course.

Playing fields are provided at Love Lane, and a children's playground is situated in Bell Hill.

## VITAL STATISTICS.

Births.	1949.			1950.		
	M.	F.	Total.	M.	F.	Total.
Live Births (Legitimate)	43	45	88	55	53	108
(Illegitimate)	2	3	5	4	1	5
Total Live Births	...		93			113

*Live Birth rate* per 1,000 of the estimated population was 16'32 compared with 15'8 for the whole of England and Wales.

	1949.			1950.		
	M.	F.	Total.	M.	F.	Total.
Still Births (Legitimate)	2	—	2	1	2	3
Total Still Births	...		2			3

*Still Birth rate* per 1,000 total (live and still) births was 26'5 compared with 22'6 for the whole of England and Wales.

Deaths.	1949.			1950.		
	M.	F.	Total.	M.	F.	Total.
From all causes	44	42	86	37	50	87

*Death rate* per 1,000 estimated average population was 12'57 compared with 11'6 for the whole of England and Wales.

### Maternal Mortality.

	1949.	1950.
From Puerperal Sepsis	...	Nil
From other Puerperal Causes	Nil	Nil

*Maternal Mortality rate* per 1,000 total (live and still) births, 0'0.

### Infant Mortality (deaths under one year).

	1949.			1950.		
	M.	F.	Total.	M.	F.	Total.
Legitimate	...	—	1	1	1	2
Illegitimate	...	—	—	—	—	—
			1			2

*Infant Mortality rate* per 1,000 live births was 17'69 compared with 29'8 for the whole of England and Wales.



The number of deaths of infants under the age of one year, per 1,000 live births, is known as the infant mortality rate for that year.

This rate for each calendar year is not regarded as a reliable guide, for the number of births in the District is insufficient to be of significance statistically.

But, if this rate is taken over a period of five years, it is then considered reasonably reliable and one of the best indices of the social circumstances of the district. High rates are commonly associated with overcrowding and defective sanitation.

It is therefore satisfactory to report that, during the past fifteen years, the quinquennial rates for this District have been considerably lower than the figures for the country as a whole.

The following table shows the rate for the District as compared with the rate for England and Wales, each over a five-year period :—

Year.		Petersfield U.D.C.		England and Wales.
1934	...	28'38	...	60'8
1935	...	26'18	...	59'4
1936	...	29'47	...	57'2
1937	...	26'65	...	55'4
1938	...	32'19	...	55'2
1939	...	33'71	...	55'4
1940	...	35'19	...	53'6
1941	...	30'30	...	52'8
1942	...	31'88	...	52'0
1943	...	34'07	...	50'0
1944	...	34'12	...	46'6
1945	...	34'76	...	45'0
1946	...	36'71	...	42'0
1947	...	32'41	...	39'2
1948	...	26'35	...	35'9

The infant mortality rate for the year under review was 17'7 compared with 29'8 for England and Wales.

The corresponding figure for 1949 was 10'75 compared with 32'0 for England and Wales.

Incidentally, this rate for 1949 was the lowest recorded for this district during this period.

## Causes of Death.

	MALE.	FEMALE.
1. Tuberculosis of Respiratory System ...	—	—
2. Other forms of Tuberculosis ...	—	—
3. Syphilis ...	—	—
4. Diphtheria ...	—	—
5. Whooping Cough ...	—	—
6. Meningococcal Infections ...	—	1
7. Acute Poliomyelitis ...	—	—
8. Measles ...	—	—
9. Other Infective and Parasitic Diseases ...	—	—
10. Malignant Neoplasm, Stomach ...	—	—
11. „ „ Lung, Bronchus ...	1	—
12. „ „ Breast ...	—	3
13. „ „ Uterus ...	—	1
14. Other Malignant & Lymphatic Neoplasms	4	6
15. Leukæmia, Aleukæmia ...	—	—
16. Diabetes ...	—	—
17. Vascular Lesions of Nervous System ...	4	11
18. Coronary Disease, Angina ...	5	1
19. Hypertension with Heart Disease ...	2	2
20. Other Heart Disease ...	8	13
21. Other Circulatory Disease ...	1	3
22. Influenza ...	1	1
23. Pneumonia ...	—	1
24. Bronchitis ...	1	2
25. Other Diseases of Respiratory System ...	1	—
26. Ulcer of Stomach and Duodenum ...	1	—
27. Gastritis, Enteritis and Diarrhœa ...	—	—
28. Nephritis and Nephrosis ...	1	1
29. Hyperplasia of Prostate ...	1	—
30. Pregnancy, Childbirth, Abortion ...	—	—
31. Congenital Malformations ...	1	1
32. Other Defined and Ill-defined Diseases ...	5	3
33. Motor Vehicle Accidents ...	—	—
34. All other Accidents ...	—	—
35. Suicide ...	—	—
36. Homicide and Operations of War ...	—	—
	<u>37</u>	<u>50</u>

# ANALYSIS OF THE CAUSES OF DEATH ACCORDING TO AGE.

## Causes of Death.

### AGE GROUPS.

	0-1		1-10		10-20		20-30		30-40		40-50		50-60		60-70		70-80		80-90		90-100		Total
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
Meningococcal Infections ...	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Malignant Neoplasm, Lung, Bronchus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1
" " Breast	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	2	-	-	-	-	-	3
" " Uterus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	1
Other Malignant & Lymphatic Neoplasms	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	1	1	3	1	-	-	-	10
Vascular Lesions of Nervous System ...	-	-	-	-	-	-	-	-	-	-	1	-	1	-	1	1	4	3	1	-	4	-	15
Coronary Disease, Angina	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	2	-	1	-	-	1	6
Hypertension with Heart Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	1	-	1	-	-	4
Other Heart Disease ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	4	3	2	4	6	-	1	21
Other Circulatory Disease	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	-	1	-	-	4
Influenza ...	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	1	-	-	-	-	-	2
Pneumonia ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1
Bronchitis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	1	-	-	3
Other Diseases of Respiratory System	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1
Ulcer of Stomach and Duodenum	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Nephritis and Nephrosis ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	2
Hyperplasia of Prostate ...	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	1
Congenital Malformations ...	1	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Other Defined and Ill-defined Diseases	-	-	-	-	1	-	-	-	-	-	-	1	1	-	1	-	1	-	1	2	-	-	8

## **GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.**

### **Ambulance Facilities.**

All applications for the use of ambulances should now be directed to the Ambulance Officer, Fareham (Telephone, Fareham 2170) who arranges for the most conveniently situated ambulance to attend.

Arrangements for the removal of smallpox cases (suspected or confirmed) are dealt with by the Aldershot Ambulance Station (Telephone, Aldershot 299), but applications should be made through the Ambulance Officer at Fareham.

### **Laboratory Facilities.**

Bacteriological work is carried out by the Public Health Laboratory at the Royal Hampshire County Hospital, Winchester (Telephone, Winchester 3807) and specimens of clinical materials (sputum, swabs, etc.) and samples of water, milk and foodstuffs are sent for bacteriological examination to Dr. R. Mackenzie, Director of the Public Health Laboratory.

Some specimens in connection with cases of infectious diseases, which have been admitted to the Portsmouth Infectious Diseases Hospital, are sent for bacteriological examination to Dr. K. Hughes, Director of the Central Laboratory, Milton, Portsmouth (Telephone, Portsmouth 74785).

Samples of water, sewage, milk, etc., for chemical analyses are sent to the City Analyst, Portsmouth (Telephone, Portsmouth 5482).

### **Nursing in the Home.**

There are two midwives practising in Petersfield. Miss B. E. Bloomfield, s.c.m., Jasmine Cottage, Town Lane, Sheet, Petersfield (Telephone 667) serves Stroud, Sheet and North Petersfield, and Miss E. E. Heins, s.c.m., 2 Petersfield Road, Buriton (Telephone 628) carries out her duties in South Petersfield.

The Health Visitor, Mrs. C. E. Foster, s.r.n., s.c.m., A.R.San.1., carries out the Public Health work in the district under the direction of the County Medical Officer.

## Day Nursery.

The control of the Day Nursery was vested in the Council's Public Health Committee, who appointed a sub-committee for its day-to-day management.

The building adjoined the County Council Health Centre, Ramshill, and had accommodation for twenty-five children between the ages of two and five years.

It was available for the use of mothers who were at work and unable to look after their children during the day.

It is regretted that this Nursery is now closed.

## Clinics.

A County Council Health Centre was opened at 1 Ramshill, Petersfield, in March, 1950. The following Clinics are held there :—

*Ophthalmic Clinic ... ..	3rd Mondays from 9.30 a.m. to 3 p.m.
*Orthopædic Remedial Clinic ...	1st Tuesday mornings and other Tuesday afternoons by appointment.
Ante-natal Clinic ... ..	1st Tuesday afternoons.
Child Welfare Centre ... ..	Wednesday afternoons.
Verminous Cleansing Clinic ...	Friday mornings.
School Clinic ... ..	Friday mornings.
Dental Clinic ... ..	By appointment.
Speech Therapy Clinic ... ..	Wednesdays, 9.30 a.m. and 1.30 p.m. by appointment.

## Child Welfare Centre.

A Local Committee is responsible for the work of the Child Welfare Centre, Ramshill, which meets every Wednesday afternoon.

The work of these voluntary helpers, who assist the Medical staff, is greatly appreciated.

### **Ante-natal Clinic.**

An ante-natal Clinic is held on the 1st Tuesday of the month at Ramshill.

### **\*Tuberculosis Clinic.**

A Tuberculosis Clinic is held every Thursday from 9.30 a.m. to 3.30 p.m. at the County Council Health Centre, Park Way, Havant.

Dr. Butterworth, the Assistant Tuberculosis Officer, is in attendance.

### **\*Venereal Diseases.**

Treatment is available at St. Mary's Hospital, Portsmouth.

Males : Tuesdays and Thursdays, 10 a.m. to 7 p.m.

Females : Mondays 5 p.m. to 7 p.m., Wednesdays 2 p.m.,  
Fridays 10 a.m.

## **SCHOOL HEALTH SERVICES.**

### **\*Orthopædic Clinics.**

Orthopædic cases, requiring treatment, are referred through the Lord Mayor Treloar's Hospital, Alton, to the following Clinics :—

Alton.            *Surgeon's Clinic*, held at Lord Mayor Treloar Hospital, on fourth Tuesdays, odd months, at 10 a.m.

*Minor Clinic*, attended by Surgeon, held at Lord Mayor Treloar Hospital, on fourth Saturdays, even months, at 10 a.m.

Havant.        *Surgeon's Clinic*, held at County Council Health Centre on fourth Tuesdays, even months, at 10 a.m.

*Minor Clinic*, held at County Council Health Centre on second and fourth Wednesdays, odd months, at 10 a.m.

Petersfield.   *Remedial Clinic*, held at County Council Health Centre, Ramshill, first Tuesday, at 10 a.m., other Tuesdays at 1.30 p.m.

Orthopædic cases, requiring remedial treatment, are referred to this Clinic.



### **\*Ophthalmic Clinic.**

This is held for school and pre-school children at the County Council Health Centre, Ramshill, on the third Monday of the month, *by appointment*, from 9.30 a.m. to 3 p.m.

### **\*Orthoptic Clinic.**

Cases, selected by the School Oculist, are referred to the Eye and Ear Hospital, Portsmouth.

### **Ear, Nose and Throat Clinics.**

Cases, referred for specialist advice, are examined at the Portsmouth Eye and Ear Hospital and treatment is carried out either at that Hospital or at Petersfield Hospital.

### **School Clinic.**

This is held at the County Council Health Centre, Ramshill, Petersfield, on Friday mornings.

The Health Visitor attends every Friday morning till noon ; the Medical Officer is in attendance on the first Friday of the month.

### **Speech Therapy Clinic.**

Cases attend at the County Council Health Centre, Ramshill, Petersfield, on Wednesdays at 9.30 a.m. and 1.30 p.m. *by appointment*.

### **Child Guidance Clinic.**

Cases are seen, *by appointment*, at Trafalgar House, Winchester.

### **Vermineous Cleansing Clinic.**

A Cleansing Centre is available at the County Council Health Centre, Ramshill, Petersfield.

The Clinic is held on Fridays at 9.30 a.m.

### **Dental Clinic.**

Dental Clinics, when required, are held at the Schools and at the County Council Health Centre, Ramshill.

*\* These services are the responsibility of the Regional Hospital Board.*

## **General.**

## **HOSPITALS.**

There are four general hospitals available for the admission of patients from Petersfield.

### **PETERSFIELD GENERAL HOSPITAL.**

The Petersfield Hospital (Telephone, Petersfield 19) has twenty-eight beds available for medical, surgical and maternity cases.

It is now administered by a local Committee under the control of the Regional Hospital Board.

**THE ROYAL PORTSMOUTH HOSPITAL, PORTSMOUTH.**  
(Telephone, Portsmouth 2103).

**ST. MARY'S HOSPITAL, PORTSMOUTH.**  
(Telephone, Portsmouth 2476).

**THE ROYAL HAMPSHIRE COUNTY HOSPITAL, WINCHESTER.**  
(Telephone, Winchester 2345).

## **Heathside Hospital, Petersfield.**

At the end of 1948, Petersfield Isolation Hospital was closed and it was re-named "Heathside Hospital." This institution which is now under the control of the same committee as the General Hospital, Petersfield, was re-opened on the 1st October, 1949, for the admission of chronic sick patients. There are thirty beds available.

## **Infectious Diseases.**

Since the closure of the Petersfield Infectious Diseases Hospital, there is no infectious diseases hospital situated in the district.

Any Infectious Diseases Hospital is now available for the admission of cases occurring in the district. Patients are generally admitted to Portsmouth Infectious Diseases Hospital, Milton Road (Telephone, Portsmouth 2046), which is under the control of the Regional Hospital Board.

Special arrangements have been made for the admission of children suffering from acute polio-myelitis to Lord Mayor Treloar Hospital, Alton (Telephone, Alton 2238).

## **Sanatoria.**

Sanatoria for patients, who are suffering from Tuberculosis, are provided by the Regional Hospital Board.

## **Smallpox.**

The Regional Hospital Board makes provision for the treatment of cases of smallpox at Crabwood Smallpox Hospital. The County Medical Officer arranges for the admission of the patients.



## **HOUSING.**

### **Provisions of New Houses.**

During the year, twenty-six traditional type houses and flats were completed by the Council. Sixty-eight Reema type permanent pre-fabs. were also erected.

In addition, eleven houses were built by private enterprise and two houses were converted to make four flats.

## **INSPECTION AND SUPERVISION OF FOOD.**

### **Milk Supply.**

The Food and Drugs (Milk and Dairies) Act, 1944 is the principal act dealing with milk production and distribution.

The Ministry of Agriculture and Fisheries is responsible for the supervision of milk production on the farms, whilst Local Authorities control milk distributors and retail dairies.

The Milk (Special Designation) Act, 1949, and regulations made thereunder, deal with the issue of licences for the following grades of milk :—

1. Tuberculin Tested.
2. Accredited.
3. Pasteurised.
4. Sterilised.

#### **1. TUBERCULIN TESTED.**

Milk Licences to produce this grade of milk are issued by the Ministry of Agriculture and Fisheries.

Local Authorities may issue "Dealers' Licences" authorising the use of the designation in relation to milk sold in the district.

Three "Dealers' Licences" were issued during the year.

#### **2. ACCREDITED MILK.**

Licences to produce this grade of milk are also issued by the Ministry of Agriculture and Fisheries.

New Accredited Licences will not be issued after 1952 and the designation will cease to exist in 1954.

Local Authorities may issue "Dealers' Licences" for the retail sale of Accredited Milk. No such licences were issued during the year.

### 3. PASTEURISED MILK.

The Act places the responsibility on Food and Drugs Authorities for issuing licences to Pasteurise.

The Hampshire County Council, who is the Food and Drugs Authority in this district, delegated its functions under the Milk (Special Designation) (Pasteurised and Sterilised) Regulations, 1949, to the Councils of County Districts, who will continue the supervision and sampling of Pasteurisation Plants.

Two kinds of Pasteurising Plants are permitted by the regulations : (1) " Holder Type " in which the milk is held at a temperature of 145–150° F. for thirty minutes ; (2) H.T.S.T. plants in which the minimum temperature is 161° F. and the milk is held for fifteen seconds.

The H.T.S.T. plants have now been thoroughly tested and the one plant, operating in this district, has a record of no unsatisfactory samples taken over a period of two-and-a-half years since it was first installed.

Three licences to produce Pasteurised Milk were issued by this Council in 1950. Over ninety per cent of all the milk, sold in the district, is now pasteurised. All the milk supplied to schools is pasteurised.

### 4. STERILISED MILK.

The regulations require that milk shall be filtered and clarified, homogenised and heated to and maintained at not less than 212° F. for such a period as to ensure that it will comply with a turbidity test as prescribed in the regulations. There are no plants for the production of this grade of milk in the Urban District, but a " Dealers' Licence " to sell sterilised milk has been granted to a Southsea firm.

## **Meat and other Foods.**

The Government slaughter-house is still in operation at Grange Farm. One great advantage of centralised slaughtering is the fact that it makes it possible for all meat to be inspected. It is hoped that some form of centralised slaughtering will be continued and that private slaughter-houses will never be re-opened.

The Ministries of Health and Food continued their campaign to promote greater cleanliness in all premises where food is handled.

It is satisfactory to report that no case of food poisoning or of illness, caused by the consumption of food and drink, was notified in this district; although numerous outbreaks were recorded throughout the country. These outbreaks are almost entirely due to the lack of cleanliness amongst the personnel of food premises.

The two types of germ, that can thrive in the human body and are mainly responsible for cases of food poisoning, are the *Staphylococcus* and the *Salmonella* organisms. The *Staphylococcus* is present in the nose, throat and skin and in septic sores. The *Salmonella* is usually found in the bowels; and, as some people may harbour the germ without being ill, food may easily be infected if such a "carrier" happens to be a food handler.

The washing of hands immediately after using the lavatory is an essential precaution, as toilet paper is porous.

The remedy in both cases is personal cleanliness and, above all, clean hands.

Any employee, infected with diarrhoea or with septic sores or boils, should not be allowed to handle food.

It should constantly be borne in mind by all concerned in the handling, preparation, and storage of food—and particularly by those who work in canteens or who serve food to large numbers—that the utmost care must be taken to obviate the risk of food poisoning. This may occur, even in the best equipped of canteens, and prevention is largely dependent on personal hygiene. The food itself will probably appear to be all right; but, even so, it can still act as a vehicle for the transmission of infection.

Certain foods (e.g. pressed meat, brawn, meat pies, stews, trifles, custards and synthetic cream) are normally quite safe when prepared; but act as ideal breeding grounds for any dangerous germs that gain access—especially if kept at warm temperatures.

Although refrigeration does not actually kill the organisms, it definitely retards their growth; and it is most important that these vulnerable foods are stored at a low temperature to prevent the germs from multiplying.

It is now fully appreciated by all food traders that refrigeration prevents food from going bad, resulting in a saving of money and prevention of food infections.

## PREVALENCE OF, AND CONTROL OVER, INFECTIOUS DISEASES.

### VACCINATION.

Persons, who travel from infected areas to this country *by sea* (with the exception of those coming by one of the short sea routes) have usually passed the incubation period of smallpox before arrival in England.

Whereas those, who travel *by air*, arrive in this country before the incubation period of smallpox has elapsed, so there is greater risk that a case might land here before the disease has become apparent.

From time to time, outbreaks arise from cases that develop after landing ; and, in order to counteract this increased risk of infection, it is all the more important that primary vaccination in infancy and periodic re-vaccination should be carried out.

The ideal time for the first vaccination is during the first six months of infancy—preferably about the fourth month.

Children should be re-vaccinated before the age of ten years—preferably between seven and ten years—and on subsequent occasions if there has been exposure to smallpox.

The following is an extract from the latest report of the Chief Medical Officer to the Ministry of Health :—

“ While parents appear to have become more casual about the need for *infant* vaccination, now that the element of compulsion has been removed ; its popularity—as an emergency measure in an outbreak of smallpox—has been well demonstrated in recent outbreaks.

Vaccination and other measures, used locally, were fortunately effective to deal promptly with these dangerous situations ; but this is not a sufficient argument in favour of delaying primary vaccination from infancy until a later age or until the individual has almost certainly been exposed to the infection of smallpox.

To delay the first vaccination from infancy until a later age is contrary to the best interests of the individual who is thus denied the opportunity of acquiring, with minimum risk, an initial immunity to smallpox, that can be effectively revived with little inconvenience should the necessity arise later.

This conception of routine infant vaccination as a procedure, which provides an essential foundation on which a solid immunity to smallpox can be rapidly and safely built up by further vaccination in emergency, is not enough appreciated by parents."

### Diphtheria Immunisation.

Children can be immunised by their own doctors or at the Child Welfare Centre.

There is also an Immunisation Clinic, held at the Town Hall, on the fourth Wednesday morning of each month.

During the year, one hundred and three immunisations against diphtheria were carried out.

<i>Immunisation.</i>	<i>Pre-school Children.</i>	<i>School Children.</i>
Primary ...	86	Nil
Re-inforcing	Nil	17

At the end of the year the percentage of immunised children under the age of fifteen years was 58'52 compared with a corresponding figure of 65'7 for the country as a whole in 1949.

It is therefore proposed to have a diphtheria immunisation campaign in 1951.

The following table gives the annual incidence and mortality from diphtheria since 1935 :—

	1935	1936	1937	1938	1939	1940	1941	1942
Cases ...	—	13	6	9	1	2	1	—
Deaths ...	—	—	—	1	—	—	—	—
	1943	1944	1945	1946	1947	1948	1949	1950
Cases ...	9	—	—	—	—	—	—	—
Deaths ...	—	—	—	—	—	—	—	—



It is satisfactory to report that there has only been one death from diphtheria since the Council's scheme for diphtheria immunisation by general practitioners was commenced in 1935.

It will also be noted that no case of diphtheria occurred during the past seven years.

In 1943, the nine cases occurred amongst Portsmouth evacuees at West Mark Camp.

There have been no cases in local children since 1941.

### **Diphtheria Immunisation Propaganda.**

The Ministry of Health recommends that all children should be immunised before their first birthday—preferably at the age of seven or eight months and that they should receive their first “booster” or re-inforcing dose just before entering school, and again every four or five years throughout school life.

In order that protection against epidemic diphtheria can reasonably be assured, the proportion of people immunised against diphtheria should be kept up to the 75% level

The danger now is that, owing to the decreased demand for immunisation the proportion of protected persons may drop to a level at which the population of a few unfortunate towns or even of areas of the country would be vulnerable to diphtheria.

Owing to the fact that immunity against diphtheria takes several weeks to develop, those that have been inoculated earlier in life will have the advantage of receiving protection against diphtheria at short notice.

It is, therefore, of the utmost importance for parents to realise that active immunisation in the first year of life and re-inforcing doses of prophylactic in later years are just as necessary in the *absence* of diphtheria epidemics as in their presence.

## Notifiable Diseases.

Particulars of cases of Infectious Diseases, that occurred during the course of the year, are shown in the following table :—

<i>Diseases.</i>	<i>Total Cases Notified.</i>	<i>Total Deaths.</i>
Scarlet Fever ... ..	1	—
Diphtheria ... ..	—	—
Puerperal Pyrexia ... ..	—	—
Pneumonia ... ..	—	—
Dysentery ... ..	—	—
Erysipelas ... ..	1	—
Ophthalmia Neonatorum ... ..	—	—
Enteric Fever (including Paratyphoid) ... ..	—	—
Acute Polio-myelitis and Polio-encephalitis ... ..	1	—
Cerebro-spinal Fever ... ..	—	—
Measles ... ..	23	—
Whooping Cough ... ..	5	—
<b>TOTALS</b> ... ..	<b>31</b>	<b>—</b>

An analysis of the total notified cases according to age groups is given below :—

<i>Age Group.</i>	<i>Scarlet Fever.</i>	<i>Measles.</i>	<i>Whooping Cough.</i>	<i>Pneu- monia.</i>	<i>Erysipelas.</i>	<i>Acute Polio- myelitis.</i>
Under 1 year ...	—	—	—	—	—	—
1 - 2 years ...	—	—	—	—	—	—
2 - 3 „ ...	—	4	—	—	—	—
3 - 4 „ ...	—	4	1	—	—	—
4 - 5 „ ...	—	2	—	—	—	—
5 - 10 „ ...	1	13	4	—	—	—
10 - 15 „ ...	—	—	—	—	—	1
15 - 20 „ ...	—	—	—	—	—	—
20 - 35 „ ...	—	—	—	—	—	—
35 - 45 „ ...	—	—	—	—	—	—
45 - 65 „ ...	—	—	—	—	1	—
Over 65 „ ...	—	—	—	—	—	—

Only certain forms of Pneumonia are notifiable.

No deaths from Infectious Diseases occurred.

### **Polio-myelitis.**

During the year, there was a widespread epidemic of Polio-myelitis and it is satisfactory to report that only one case occurred in the district.

### **Scabies.**

Facilities for the treatment of Scabies are available at Havant and Portsmouth Disinfestation Clinics.

Appointments for cases requiring treatment are made through this Department.

Scabies should be regarded as a family infection; and all members of the same family should present themselves for treatment simultaneously—whether or not they complain of “The Itch” and show evidence of Scabies at the time. Otherwise an early case may escape detection and the parasite may thrive in one member and re-infect the others.

### **Pediculosis.**

Cases of Pediculosis (head lice) may be referred for treatment at the Cleansing Clinic, County Council Health Centre, Ramshill, Petersfield, on Friday mornings.

Pediculosis should also be regarded as a family infection; and, when a child is found to be verminous, all the members of the family should offer themselves for examination. This wise practice would ensure that any undetected case in the same family would receive immediate treatment and that there would be no further spread of infection of others.



## TUBERCULOSIS.

Age Period.	New Cases.				Deaths.			
	Respiratory.		Non-Respiratory.		Respiratory.		Non-Respiratory.	
	M.	F.	M.	F.	M.	F.	M.	F.
0 - 1 ... ..	—	—	—	—	—	—	—	—
1 - 5 ... ..	—	—	—	—	—	—	—	—
5 - 15 ... ..	—	—	—	1	—	—	—	—
15 - 25 ... ..	—	—	—	—	—	—	—	—
25 - 35 ... ..	—	1	—	—	—	—	—	—
35 - 45 ... ..	—	—	—	—	—	—	—	—
45 - 55 ... ..	—	—	—	—	—	—	—	—
55 - 65 ... ..	—	—	—	—	—	—	—	—
65 and over ...	—	—	—	—	—	—	—	—
TOTAL ... ..	—	1	—	1	—	—	—	—

On 31st December, 1950 the total number of cases on the register was forty-three. No action was taken in 1950 under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from Pulmonary Tuberculosis employed in the milk trade), or under Section 172 of the Public Health Act, 1936 (relating to compulsory removal to hospital of persons suffering from Tuberculosis).

# **Report on the work of the Sanitary Inspector**

for the year ended 31st December, 1950.

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## **Water Supply.**

The two sources of supply were sufficient to meet requirements. These supplies are chlorinated and samples are regularly sent for analysis. During the year, forty-nine samples of the public supply were analysed and forty-six were reported on as satisfactory.

## **Drainage and Sewerage.**

No major works were carried out during the year on the sewerage system. Five cottages at Sheet were connected to the sewer.

## **Closet Accommodation.**

With few exceptions, the pails of the houses, that are not connected to the public sewer, are emptied twice a week by the Hants Cleansing Service.

## **Public Cleansing.**

The Council is responsible for the cleansing of all the roads in the district.

Refuse collection is carried out weekly at Petersfield and Sheet, and fortnightly at Stroud.

## **Shops.**

All shops are inspected for compliance with the Shops' Act, especially where changes are made. No cases of infringement were found.

## **Eradication of Bed Bugs.**

No case of infestation by bed bugs was reported.

## **Camping Sites.**

Regular inspections were made of all licensed sites. These are all reasonably well kept. Two caravans were discovered on unlicensed sites, and immediate action resulted in their removal within the permitted time limit.

## Rodent Control.

Work on this was maintained throughout the year and block control was carried out. No major infestations were found.

Of the Council's own properties, the Sewage Works, Refuse Dumps at Durford Road and Borough Road, the Council Yard and banks of the stream at the rear, were all dealt with at least twice during the year.

The sewers on the Cranford Road Estate had a maintenance treatment but were found not to be infested.

## Details of work on Rodent Control.

### VISITS AND INSPECTIONS—

Survey and Extermination	...	...	418
COMPLAINTS RE INFESTATION	...	...	80
Premises treated by the Council—			
Council Property	...	...	12
Private Property	...	...	100
Premises treated by Ministry of Agriculture	...		1
			<hr/>
TOTAL	...		113
			<hr/>

## General Inspection of the Area.

Total number of visits made (including food inspections)	...	...	...	3353
Number of complaints received and dealt with	...			191

## Visits and Inspections.

Drainage	...	...	...	140
Water Supply (sampling of water)	...	...	...	66
Fried Fish Shops	...	...	...	10
Shops (under Shops' Acts)	...	...	...	17
Camping Sites	...	...	...	25
Common Lodging House	...	...	...	6
Sewage Works (for Rodent Control)	...	...	...	30
Refuse Tips re Fly Infestation and Rodent Control				50
Re Disinfection of Rooms	...	...	...	8
Ice Cream Premises	...	...	...	17
New Buildings	...	...	...	221
Infectious Disease	...	...	...	13
New Drains and Sewers Tested	...	...	...	27
Factories	...	...	...	59
Schools	...	...	...	17
Pail Scavenging	...	...	...	39

**Summary of work carried out under  
Public Health and Housing Act.**

1. Inspection of dwelling-houses during the year—
  - (1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) ... .. 62
  - (b) Number of inspections made for the purpose 118
  - (2) (a) Number of dwelling-houses (included under sub-head [1] above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 ... .. 15
  - (b) Number of inspections made for the purpose 34
  - (3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... Nil
  - (4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be, in all respects, reasonably fit for human habitation ... 34
2. Remedy of defects during the year without service of formal notices—
 

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers ... 23
3. Action under Statutory Powers during the year—
  - (a) Proceeding under Sections 9, 10 and 16 of the Housing Act, 1936—
    - (1) Number of dwelling-houses in respect of which Notices were served requiring repairs ... .. Nil
    - (2) Number of dwelling-houses which were rendered fit after service of formal notices—
      - (a) By owners ... .. Nil
      - (b) By Local Authority in default of owners ... .. Nil
4. Overcrowding—
 

No cases of overcrowding were found during the year.

More housing repair work was carried out than in recent years, materials were more plentiful and more labour was available.

A list of major repairs carried out under notice is as follows :—

Ceilings repaired or renewed	...	5
Chimneys repaired	...	3
Choked drains cleared	...	11
Dampness remedied	...	11
Doors repaired	...	8
Drainage improved or repaired	...	5
Floors repaired or renewed	...	18
Food stores provided	...	2
Gutters repaired or renewed	...	5
New connections to sewers	...	2
New sinks provided	...	3
New W.C. pans provided	...	2
Ranges repaired or renewed	...	3
Roofs repaired	...	11
Walls repaired or renewed	...	2
W.C.'s repaired	...	4
Windows repaired or renewed	...	13

## INSPECTION AND SUPERVISION OF FOOD.

### Milk Supply.

The Food and Drugs Act, 1944 which came into force on the 1st October, 1949, places the responsibility for the supervision of the retail dairies and distributors on Local Authorities.

Under the Milk (Special Designation) (Pasteurised and Sterilised) Regulations, 1949, the licensing of Pasteurising plants is the responsibility of Food and Drugs Authorities. The Hampshire County Council have delegated their functions under these regulations to the Councils of County Districts.

The three pasteurising plants in the district have operated on the whole satisfactorily during the year. No trouble was experienced with the Methylene Blue Test ; all samples passed this test which is an indication of keeping quality. One dairy had several failures with the Phosphatase Test, but more care is now being taken with this plant which is now operating satisfactorily. Attention was again given to the sterilisation of milk bottles and monthly samples are now taken ; this helps the dairyman to keep check on his methods.

Of the forty-five satisfactory samples, forty-one were completely sterile, which is the standard to be attained.

## DETAILS OF MILK PRODUCERS AND DEALERS.

### Number of—

Retail Purveyors	...	...	...	5
Wholesale Dealers	...	...	...	1
Licensed Retailers of Tuberculin Tested Milk				3
Licensed Producers of Pasteurised Milk			...	3
Licensed Retailers of Pasteurised Milk			...	3
Inspections made of Dairies	...		...	184

### DETAILS OF SAMPLING.

Visits re sampling	...	...	...	161
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### PASTEURISED MILK.

No. of Samples.	Satisfactory	Failed Methylene Blue Test.	Failed Phosphatase Test.
150	142	Nil	8

### MILK BOTTLES.

No. of Samples.	Satisfactory.	Unsatisfactory.
57	45	12

Of the satisfactory samples forty-one were sterile.

## Meat and other Foods.

Number of inspections and visits made of Food Shops, Stalls, Slaughter-houses, Cafés, etc.	...	1734
--	-----	------

### (a) MEAT INSPECTION.

The Government slaughter-house at the Grange continued in use throughout the year. Slaughtering was much heavier than in the previous years, and entailed a large amount of time on meat inspection, often late in the evening and on every Sunday from July until Christmas.

As in previous years, one hundred per cent inspection of all carcasses and offal was carried out. The incidence of tuberculosis showed a rise on recent years.

### CYSTICERCUS BOVIS.

Systematic inspection for this disease was again carried out throughout the year: in each case, the internal and external masseter muscles of the head, the pillars of the diaphragm and the heart muscles were incised. This inspection is particularly important, as infected meat may give rise to the Tapeworm *Tænia Saginata* in humans.

The number of cases discovered, forty-eight, was two less than in 1949; but it is evident that the disease is still widespread.



The head, tongue and heart were condemned in every case, the remainder of the offal and the carcase are sent for cold storage for twenty-one days at 16° F. This freezing kills any cysts which may be in the carcase. After release from cold storage, the carcase is used for manufacturing purposes.

Details of cases found are as follows :—

Cases discovered	...	...	48
(Market : Local 16 ; South West 16 ; Midland 9 ; East 7).			
Percentage of animals killed	...	...	1'11
Type of animal—			
Steer	...	...	20
Heifer	...	...	12
Cows	...	...	15
Bull	...	...	1
Primary Cyst discovered—			
Head	...	...	31
Heart	...	...	17

The incidence was again highest during the summer months.

In every case, a letter was sent to the Sanitary Inspector of the district in which the market, from which the animal came, is situated.

Nearly all have co-operated ; but useful information was obtained in only a few cases as the extensive movement of some cattle rendered it very difficult to trace the origin.

In a few cases, however, evidence was discovered of possible sources of infection, these included displaced persons and ex-prisoners-of-war working on the land and the emptying of cesspool contents on to land where cattle have access. Human beings suffering from Tapeworm infection, which is common on the continent of Europe, can infect land in this way.

The Public Health Laboratory Service is carrying out an investigation of this disease and any useful information has been passed on to them.

DISTOMATOSIS (FLUKE DISEASE) in cattle livers was again very prevalent, and seems to be increasing. The wastage of liver is considerable.

Details are as follows :—

Whole livers condemned	...	1,079
Part livers condemned	...	685
		<hr/>
TOTAL	...	1,764
		<hr/>
Weight	...	18,300 lbs.
Percentage of total inspected	...	41'11

The number of livers, affected with Distomatosis, is mainly responsible for the high percentage of cattle affected with disease other than Tuberculosis, as shown in the following table :—

Details of Inspections.	Cattle exclu'ng Cows.	Cows.	Calves.	Sheep and Lambs.	Pigs.
Number killed ... ..	2563	1727	3177	7182	105
Number inspected ... ..	2563	1727	3177	7182	105
<i>All diseases except Tuberculosis—</i>					
Whole carcasses condemned ...	3	15	28	12	10
Carcasses of which some part or organ was condemned ...	697	493	1	269	11
Percentage of the number inspected affected with disease other than T.B. ... ..	27·38	29·41	0·91	3·91	20·00
<i>Tuberculosis only—</i>					
Whole carcasses condemned ...	11	65	2	—	1
Carcasses of which some part or organ was condemned ...	181	456	—	—	7
Percentage of the number inspected affected with T.B. ... ..	7·57	30·16	0·06	—	7·61

#### DETAILS OF CONDEMNATIONS.

76 Beef carcasses and all offal	-	Tuberculosis (65 cows).
4 Beef carcasses and all offal	-	Septicæmia (3 cows).
6 Beef carcasses and all offal	-	Johne's Disease with Emancipation
3 Beef carcasses and all offal	-	Fevered (1 cow). [(6 cows).
4 Beef carcasses and all offal	-	Dropsy (4 cows).
1 Beef carcase and all offal	-	Rockl's Granuloma (Generalised).
33 Fore Quarters	-	- Tuberculosis.
3 Hind Quarters	-	- Tuberculosis, Bruised.
24 Briskets	-	- Tuberculosis, Bruised, etc.
20 other parts	-	- Tuberculosis, Abscess, Bruised.
434 Heads, Tongues	-	- Tuberculosis, Cysticercus Bovis.
578 sets Lungs	-	- Tuberculosis, Pleurisy.
1380 Beef Livers	-	- Distoma, Angioma, Abscess.
685 part Livers	-	- Distoma.
20 Skirts	-	- Tuberculosis.
61 Hearts	-	- Cysticercus Bovis, Abscess.
137 sets Guts	-	- Tuberculosis, Abscess.
49 sets Udders	-	- Mastitis, Tuberculosis.
36 Tripes	-	- Tuberculosis.



35 Spleens	-	-	-	-	Tuberculosis.
31 Calf carcasses	-	-	-	-	Septicæmia, Immature.
10 Pig carcasses	-	-	-	-	Septicæmia, Tuberculosis.
12 Sheep carcasses	-	-	-	-	Septicæmia, Abscess, Dropsy.
215 Sheep livers	-	-	-	-	Distoma, Abscess.

Total weight of meat condemned ... 53 tons, 1 cwt.

#### (b) OTHER FOODS.

Bye-laws relating to Handling, Wrapping and Delivery of Food and Sale of Food in the Open Air, made under the Food and Drugs Act, 1938, and based on the Model Bye-laws, issued by the Ministry of Food, were made by the Council and came into force on the 26th June, 1950.

These Bye-laws contain valuable provisions relating to the handling, protection of food from contamination, and cleansing of premises.

To implement these Bye-laws, a series of recommendations were made by the Council to assist Food Traders in complying with the law, and to give guidance as to the interpretation of the Food and Drugs Act and Bye-laws.

These recommendations deal with the cleansing of food rooms, washing facilities, adequate supplies of hot and cold water, protection of food exposed for sale—particular in the open air and in open shop windows. A particular section of the recommendations points out how essential it is for employees to wash their hands immediately after visiting a sanitary convenience and they advise that there should be no smoking during the preparation, handling and distribution of foodstuffs.

Open air stall-holders are recommended to have coverings at the top, back and sides of the stall, and not to place any food nearer than eighteen inches from the ground.

These recommendations have been well received and an increasing number of Food Traders is endeavouring to carry them out.

With the passing of the Food Handling Bye-laws and the recommendations, much attention was paid to food premises. All the principal food shops have been inspected and, in several cases, better washing facilities have been provided—including the provision of wash basins with instantaneous hot water heaters.

Many food traders are co-operating and, in these premises, conditions have been satisfactory ; but much remains to be done to bring all food premises up to the desired high standard.

The report of the Catering Trade Working Party shows that many undesirable methods of food handling are common in this country, and it is to be hoped that at least a minimum "Code of Practice" will become law very soon.

The following foodstuffs were voluntarily surrendered and condemned :—

- 13 tins Corned Beef.
- 9 tins Cooked Meat.
- 14 tins Vegetables.
- 58 tins Milk.
- 12 tins Fish.
- 3 tins Fruit.
- 2 tins Syrup.
- 2 jars Mincemeat.
- 30 lbs. Fish.
- 40 lbs. Meat Pies.
- 36 lbs. Sausages.
- 8 Sausage Rolls.
- 11 lbs. Bacon.
- 38½ lbs. French Ham.
- 40 Pheasants.
- 3 doz. Eggs.
- 96 lbs. Beef (bone taint).
- 30 bottles Tomato Sauce.

### Adulterations.

The law relating to the composition of food and drugs is administered by the County Council. The Food and Drugs Act, 1938, places restrictions on the addition of other substances to any food or drug. It also controls the abstraction from food of any of its constituents. Probably the most important section in Part 1 of the Act is Section 3, which relates to the sale of food and drugs which are not of the nature, substance or quality demanded by the purchaser. Most of the prosecutions which arise are in respect of offences under this section.

I am indebted to Mr. C. O. Perry, Chief Inspector under the Food and Drugs (Adulteration) Act, for the information that thirty-eight samples were taken in the district during the year.

Details of these are as follows :—

Milk	...	...	...	21
Butter and other Fats	...	...	...	4
Drugs	...	...	...	2
Sausage and other Meat Products	...	...	...	4
Spirits	...	...	...	3
Other Foods	...	...	...	4

All the samples proved to be genuine, and the twenty-one samples of milk contained an average of 4'01% Milk Fat and 8'80% Non-Fatty Solids.

## FACTORIES ACT, 1937.

### Part 1 of the Act.

#### 1. **Inspections** for purposes as to health.

Premises.	Number on Register.	Inspections.	Number of written Notices.
(1) Factories in which Section 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ... ..	29	25	—
(2) Factories not included in (i) in which Section 7 is enforced by the Local Authority ... ..	46	34	—
(3) Other Premises in which Section 7 is enforced by the Local Auth- ority ... ..	—	—	—
<b>TOTALS</b> ... ..	<u>75</u>	<u>59</u>	<u>—</u>

#### Cases in which **Defects** were found.

	FOUND.	REMEDIED.
Want of Cleanliness ... ..	—	—
Sanitary Conveniences unsuitable or defective ... ..	—	—
Not separate for sexes ... ..	—	—

MR. C. MAINWARING is now H.M. Inspector of Factories for the Portsmouth District, which includes the Petersfield Urban District. His address is 9 Western Parade, Southsea.









